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Apr 30, 2004 8:00 am
Secretary of State
04-30-2004 90264 013 ***150.00

2004 FOR PROFIT CORPORATION ANNUAL REPORT

94076238

DOCUMENT # P02000013023

1. Entity Name
T.S. CARE INC.

Principal Place of Business	Mailing Address
906-D MARWALT DRIVE FORT WALTON BEACH, FL 32547	P.O. BOX 14924 TALLAHASSEE, FL 32317

04272004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 42-1529312 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HARRELL, TODD D 2555 N. MONROE ST., STE. 5 TALLAHASSEE, FL 32303	Name Street Address (P.O. Box Number is Not Acceptable): 906-D MARWALT DRIVE City: FORT WALTON BEACH FL Zip Code: 32547

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Todd D Harrell
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HARRELL, SCOTT M 2555 N. MONROE ST., STE. 5 TALLAHASSEE, FL 32303	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1882 CAPITAL CIRCLE NE-STE 203 TALLAHASSEE, FL 32308
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HARRELL, TODD D 2555 N. MONROE ST., STE. 5 TALLAHASSEE, FL 32303	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 906-D MARWALT DRIVE FORT WALTON BEACH, FL 32547
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HARRELL, RICHARD L 2555 N. MONROE ST., STE. 5 TALLAHASSEE, FL 32303	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 1882 CAPITAL CIRCLE, NE-STE 203 TALLAHASSEE FL 32308
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard L Harrell 4/28/04 850-819-3465
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #